

journal of the national association. The *Journal A. M. A.* of March 3, 1928, credited the California Medical Association with a total of 4,536 members. The statistics also brought out that there were a total of 8,854 licensed physicians in California, a difference which shows a non-membership total far above what it should be. The above and other figures in the report alluded to, provoke suggestive thought to all who believe in an organized medical profession.

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Members of component county societies should keep constantly in mind the desirability of bringing every ethical practitioner of proper professional qualifications into affiliation with the component society of the county in which that eligible practitioner resides; and also, that every county society, which fails to bring such eligible physicians into affiliation with organized medicine, to that extent at least, is lacking in fullest possible efficiency.

The obligation of bringing such eligible practitioners into the fold of organized medicine should not be passed over as a sole responsibility of the officers of the county unit, for such is not the case. It is an individual and a very personal responsibility which applies to each of us. It is true that the county society officers should take the initiative, but each of us should be militant and alert in this expression of society activity, and lose no opportunity to make our respective county representation approach more and more the one hundred per cent membership standard. The subject has been discussed in some detail in past issues of *CALIFORNIA AND WESTERN MEDICINE* (May, 1927, p. 665, and January, 1928, p. 81), and officers of county units who are in doubt on how to proceed are requested to read the suggestions therein made.

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With concerted effort a very considerable addition to our membership could accrue in these remaining months of the present 1928 year. At any rate, even though many of these eligible physicians do not join now, they could be approached and their applications considered and voted on, so that they might be brought into active membership with the beginning of the new year. It would be interesting and very profitable to all concerned if a friendly contest could be inaugurated during the next few months to determine what county unit in California would show the largest percentage of membership increase. If we all do our respective parts, the 1929 San Diego annual session will be the recipient of progress reports in organization, that will be gratifying to every physician who is interested in the welfare of his profession.

C. M. A. CONSTITUTION AND BY-LAWS REVISION

Two years ago several amendments were proposed to the present constitution and by-laws of the California Medical Association.

In a consideration of the same it was decided that it might be well to have a complete revision

of the entire code undertaken, and to that end a committee of nine was appointed.

This committee presented its final report at the last annual session at Sacramento, and requested that it be discharged from its labors.

The House of Delegates having decided not to consider the revision at the Sacramento session, it was voted to print this committee draft and also a complete revision draft prepared by the general counsel of the Association in *CALIFORNIA AND WESTERN MEDICINE*. These two drafts are accordingly presented in this issue of the official journal.

A special committee, consisting of Doctors Percy Magan of Los Angeles, George Reinle of Oakland, and Alexander Keenan of San Francisco, was appointed by President Kiger and President-elect Gibbons, to make a study of these two drafts and to bring in a report thereon.

The attention of the members of the component county societies of the California Medical Association is called to these drafts which are now printed, and all members are urged to read and study the same. Suggestions are invited and may be sent to any member of the committee or to the Association.

In addition to the amendments in the proposed revisions which are now printed, other proposed amendments were submitted at the Sacramento session. Members who wish to make comparisons with the constitution and by-laws by which the California Medical Association is now governed, will find the same with other proposed amendments which were reintroduced at the Sacramento session in the August, 1927, issue of *CALIFORNIA AND WESTERN MEDICINE*, page 244.

THE ECONOMICS OF OPHTHALMIC PRACTICE—SOME MODERN DAY DRIFTS

Sight, of all the special senses, has a paramount place in the development and fate of mankind. Its conservation has merited all the splendid work of the host of medical men who, in the past, have given of their best to make the specialty of ophthalmology an outstanding science. That the future of the specialty will be safe in the hands of present day and future ophthalmologists may be taken for granted, for with both broader and more specialized training, high standard scientific progress in this field of medical endeavor should continue to be made.

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Nevertheless, as in a number of other specialties of medical practice, the economic outlook for the newer devotees or disciples of ophthalmologic practice may be said to be not overly reassuring. By this statement is meant that, in comparison with the greater cost of modern training for efficient service in this specialty, and the longer time period of preliminary preparation and study required nowadays, the financial rewards which will come to the average man in this specialty, in return for all his super expenditure of funds and study, are quite unalluring.

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Why should such be the case? Why should not the broader preliminary education, the more exact-

ing technical training, and all the extra money and study effort comprehended therein, be repaid in proper form to the newer entrants of today and tomorrow, who in not far distant days will bear the brunt of maintaining its high standards? Why should this specialty, in contradistinction to a goodly number of others, such as gynecology or pediatrics, be so relatively uninviting to the recent recipient of the M. D. degree, who is measuring the comparative values of different forms of specialized practice? Why should there seemingly have been a let-down in recent years in the attractiveness of this specialty, and to what extent will undesirable causative factors be active in the future?

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To the writer, it seems that the major of what might be called debauching influences to high standard scientific work and reward in this specialty, come back to the fact that in one of its major expressions, namely, in the correction of refractive errors through proper lenses, there is brought into operation in the ophthalmologic specialty, a contact not only with professional services, but with merchandise. It is the merchandise factor that has introduced the inharmonious element, and it is this sale of spectacles and eyeglasses that in recent years has, and in the future will continue to play havoc to a considerable extent with the financial emoluments that should be the reward of well equipped medical men who enter the specialty.

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It is not possible to here trace the development of the refraction work of the specialty, or of the secondary craftsman and merchandise output that has become so important a part of what might be called the refraction division of ophthalmologic practice. Suffice it to say that the work involved in the determination of the character of a refractive error, with a prescription for its correction, and a check on the ground lenses, were somewhat the limit of what the older ophthalmologists construed to be their obligations. The grinding of the lenses, and the making of the frame mountings was left to grinders or opticians, either alone or in conjunction with jewelers. In this way, at a time when the number of medical eye specialists were somewhat few in number, a goodly number of jewelers began to take up optician and optical work as a side line. How recent this all was, may be gleaned from a current issue of an optometric publication, in which was given a report of the annual convention of a state optometric association in the Middle West. The excerpt is as follows:

"To the reporter of the *Weekly*, the convention was of particular interest and significance, for when about fourteen years ago he was present in a like capacity to write an account of a joint meeting held by optometrists and jewelers, he expressed himself forcibly to the effect that so long as optometrists met with jewelers, he would never again set foot on the soil of such a state."

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Another interesting item in this same optometric publication is an announcement stating that

Bausch and Lomb, so long known to medical men for their microscopes and other high grade optical instruments, were offering prizes of one hundred dollars "for the best letters of suggestion on 'How to Sell the Extra Pair.'" Needless to say, if every one who wore glasses would provide himself with an extra pair, considerable benefit would accrue to the profession (optometric) at large."

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And from the Department of Public Information in the same publication, this item: "Five million school children in this country will not be ready for their work when the school bell rings, unless we educate parents and children to their visual needs, and what they lack is most vital in the scheme of their progress—comfortable vision. . . . What about you, yourself, fellow optometrist? Does not the greater blame lie with you if you do not use every avenue of publicity open to you to bring to the attention of parents, teachers, and every person and institution interested or responsible for the welfare of children, the vital importance of optometric eye care. . . . Forty per cent of the school children of your community will need eye care when vacation is over, and the time comes for them to go back to school. Someone is going to do this work. Whether these children will get the services of an optometrist, and whether that optometrist will be you, depends entirely on you, yourself. Whether you are going to get your share of this work to which you are justly entitled depends on your planning. . . . Optometric school surveys should be made, most assuredly, after school has opened, but the way should be paved before school starts."

Then follow suggestions on how best to do all this, with literature to be sent to school and other clubs.

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A year or so ago, a group of well trained opticians met in the East and formed "The Guild of Dispensing Opticians," with the object of making and selling spectacles on physicians' prescriptions only. The movement received considerable favorable comment in the *American Journal of Ophthalmology*. Not so, however, from their colleague optometrists, as witness the following paragraph from an optometric journal which printed the address of a recently retiring president of the California State Association of Optometrists, who on this subject stated: "We would further suggest that a resolution be brought in deprecating the published declaration of the Guild of Dispensing Opticians of America, and recommending that any members of this Guild who are holding an optometric license in any state, have their license revoked for conduct unbecoming an optometrist, and that copies of this resolution be sent to the secretary of every state board of optometry in the United States."

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Official reports of state boards of licensure are usually dignified presentations of fact. A booklet from the Oregon state printing department contains the law relating to the practice of optometry and gives a list of the registered optometrists of

that state. But it also contains a deliciously interesting and naïve statement, entitled "Foreword—Optometry's Needs," by the secretary of the Oregon State Board of Examiners in Optometry, and from which the following is quoted:

"Then let us (optometrists) join, work for, and contribute to anything that will aid us to accomplish this end. Let us, therefore, as our sister professions (medicine, dentistry, law) have done, unite that we may place ourselves on the same high plane that they enjoy, and enjoy even a greater privilege of doing good for humanity—giving and preserving better sight—a privilege that does not fall within the scope of any other profession—for without vision the other professions would be greatly handicapped in their work. . . . Optometry will, when every man works for the good of the profession, be the leader of the learned professions. So let us hasten the day by uniting our efforts, and working and building as one.

Yours for a united Optometry,
 _____, Secretary."

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It is interesting to note that, owing perhaps to either a lack of ethics or a preponderance of merchandising or advertising publicity, that the sale of glasses has gotten beyond the domain of individual optometrists, and in the larger cities has become a presumably well established counter of many large department stores, even to the point of special rate reductions being featured for glasses on bargain days. And latterly, advertisements are seen, announcing that glasses will be prescribed and may be bought on time!

Also, at this year's meeting of the California State Association of Optometrists, the president recommended: "We would suggest to the resolutions committee that the attention of our State Board be called to the clause placed in the Ohio state optometry law, making it a misdemeanor to advertise prices of lenses, frames or mountings. The Oklahoma convention recently passed a resolution covering this matter."

Where all this business rivalry and publicity propaganda will end is difficult to say.

The dubious outlook in all this depreciation of professional and merchandise standards is partly dependent upon the fact that there are three or four grades of lens material, shading off from well inspected, high-grade lens material to what in California fruit establishments would be called culls. It is by no means an easy matter to always rapidly detect the deficiencies of such second rate material, in either lenses or frames, so that people purchasing glasses must take, with a grain of salt, announcements of very low prices for high-grade merchandise and workmanship, unless made by firms of well established reputation.

Optometry, however, has suffered somewhat from an oversupply of disciples and, in spite of the advertising propaganda and commercial methods, a goodly percentage are presumably not prospering financially. If reports be true, a very considerable number have taken courses in chiropractic and other cultist schools, so that as prac-

tioners of the healing art, they may get into the field of practice, and thus treat diseases and injuries of the eyes, as well as refract. If this movement becomes at all general, a vista of new and deleterious activities will spread itself before us in the near future.

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In the face of all the above, and of other factors which might be cited, it is reassuring to read some editorial comments in the *American Journal of Ophthalmology*, by that dean and leader of American ophthalmologists, Edward Jackson, M. D., of Denver, Colorado, who expresses himself thus: "It was a happy suggestion that these opticians (Guild of Dispensing Opticians) adopted, to advise the public to consult 'eye physicians.' The word 'physician' has a definite meaning in the minds of most people. It is associated with health matters, a medical education and membership in a real profession, not a profession created by legal enactment to meet the advertising needs of up-to-date business men. The optometrist could not confuse the public as to the meaning of physician. The department stores saw that advertising an "eye physician" to give advice to their customers was coming unpleasantly near to association with the advertising medical quacks. It could not be used to confuse the public to the advertiser's advantage. An eye physician, a real eye physician, who had special knowledge of the health needs of the eye, was a person the advertisers had no use for.

"The term 'eye physician' may well be a subject for special thought on the part of every physician wishing to prepare for and establish himself in ophthalmic practice. He may desire to be so designated, and may be proud to deserve the title. It suggests the broad medical and health responsibilities that rest upon every physician. It should divert the emphasis that has come to be placed on the importance of the operative surgery of the eye, to the wider, more important aspects of eye health; and to the close vital relations between eye fatigue and nerve fatigue, between eye nutrition and general nutrition, between eye health and general health."

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The partial analysis of detrimental factors in one of the important specialties in medical practice, herewith presented, suggests the desirability of members of every specialty being alert to extraneous and deleterious forces, which in their incipency, seem so trivial as to be unworthy of notice; but which, if disregarded, take on a mushroom growth and ramifications such as have been here outlined, and which today and in the future will have an important influence on the interests of American ophthalmic practice.

All these things are part and parcel of medical economics. Sections of our county and state societies might well set aside an hour at least once a year, to their own good advantage, to discuss those economic problems and trends of the today and tomorrow, that are apt to have a bearing on the scientific and economic aspects of their respective specialties.